Director's Update to the Board of Health September, 2022

Protecting Health – Preventing the Spread of Infectious Disease

COVID

The COVID new cases per 100,000 population per day have decreased over the past week to 25 new cases per 100,000 per day. The new bivalent COVID vaccines from Moderna and Pfizer-BioNTech were approved late last week. We are waiting to receive our first doses. We plan to continue to offer the primary series of vaccinations in our clinics but plan to offer the bivalent booster at some of our Strike Team Pop-up events only. The booster already is available in a number of places including pharmacies, urgent cares, and other health providers. We are doing this so we can focus on monkeypox and influenza vaccinations.

MONKEYPOX

We continue to have an increase in monkeypox cases, with 108 as of yesterday, up 15 cases from the prior week's total. That was not as steep an increase as we had seen in some previous weeks, although the reporting around Labor Day may have had something to do with that. We will be holding a special monkeypox clinic this coming Monday. It is by appointment, and we currently have about a third of the 300 time slots filled.

FLU

We will begin to offer influenza vaccinations on Sept. 19th.

Back to School Vaccinations

Kudos to our clinical services staff who handled August's back-to-school vaccination surge with their usual aplomb. From the start of the month through the 26th, dedicated as our "Back to School" time, Clinical Services staff provided 3,232 vaccines to children aged 19 and younger.

Improve and Sustain Family and Child Well-Being

Family Planning

The self-injectable DMPA birth control shot pilot program is off to a good start. This allows our Family Planning clinics to give up to a year's worth of injections to medically eligible patients without having to be seen in the clinic. Within the first month of initiation, we have had nine patients take home this medication to cover them for the next year.

Promote and Support Healthier Living

HIAP Summit

Our Health in All Policies Summit is tomorrow morning at the downtown library. Many thanks to Tracy Buck and her team for all the planning and logistics. We expect about 130 community members to participate. We view this as a prime opportunity to spread the word about this valuable process further across the Metro government as well as beyond it.

NATIONAL FEDERATION OF HUMANE SOCIETIES BASIC ANIMAL STATS MATRIX (vrs 9-2012)

IMPORTANT NOTES FOR THE BASIC DATA MATRIX

Introduction to the Basic Matrix:

This basic matrix was designed to serve as a tool for basic data collection. It is a simple matrix containing what many (including Asilomar, ASPCA, National Federation, American Humane, UC Davis, Maddies Fund, PetSmart Charities and HSUS) have agreed are the minimum data points (along with definitions) an organization should gather. Whether organizations already gather a great deal of data or have only gathered the basics, this matrix should facilitate the roll up or merging of data at the local, regional or national level by providing a common framework. This matrix does not reflect any preference in data analysis or the calculation of rates but is rather simply a tool for data collection.

Tracking by Species and Age:

The risks associated with being an adult dog, puppy, adult cat or kitten (or neonate of any kind) in a shelter environment will vary a great deal. To help shelters assess and understand the differing risks for these populations of animals, this basic animal stats matrix includes a break out by species and age. If tracking statistics broken out by species and age is beyond the capacity of an agency, simply tracking statistics by species would be a place to begin. This document defines puppy and kitten as under 5 months of age (see below: Determining Age). Again – given the differing level of risk – breaking age down further to include a neonate category for both dogs and cats can also be very informative.

Determining Age:

This basic matrix utilizes 5 months as the break point between puppy/kitten and adult. At or near 5 months of age there are changes in the teeth which can help guide trained staff regarding proper categorization of the animal. For cats, at 4-5 months of age permanent canines, premolars and molars are coming in (all in by 6 months of age). For dogs, at 5-7 months of age permanent canines, premolars and molars are coming in (all in by 7 months of age). Source: "How to . . . series" from Animal Sheltering,

http://www.animalsheltering.org/resources/magazine/may_jun_1996/how-to-determine-a-dog-or.pdf or contact the National Federation of Humane Societies for a copy of the document.

Beginning and Ending Shelter Counts:

These numbers help frame the population of the animals sheltered and cared for by the organization. We are recommending that a shelter do a walk through – physically counting the animals sheltered within the organization, and not forgetting to count those animals who have been admitted but who are not currently within the shelter (foster care, in the care of a veterinary hospital, etc).

Defining Owner Requested Euthanasia:

Some shelters offer pet euthanasia to the public as a service whose cost may be subsidized and therefore more affordable than local veterinary clinics, thus ensuring access to this service. Defining when euthanasia should be recorded as "at the request of the owner", or not, is the subject of much discussion.

For the purposes of this document, we are choosing to define owner INTENDED euthanasia as the euthanasia of a pet whose owner brought the pet to the shelter for that service. In other words, the owner brought the pet in specifically for that service – it was their intent before arriving

Any other definition of "owner requested" euthanasia leaves much up to interpretation and therefore a great deal of variation among organizations and their reporting. We believe the simplicity of this definition helps to ensure consistent application and record keeping.

Live Admissions Only

For the purposes of this matrix we are tracking LIVE admissions only, i.e. animals who are alive when they come into an agency's possession. Animals who are dead when taken in to an agency's possession may be a data point to track, but that information is not tracked by this matrix.

What is Possession?

"Adoption" and "Transferred to another Agency" both make reference to possession. The primary concept here is one of ownership. For example, in foster care, the agency still has possession or ownership. If adopted or transferred to another Agency, possession is now with the new owner, or with another Agency.

Where are the "Others"?

This basic data matrix focuses on canines and felines. Many organizations also provide extraordinary services for other pets (pocket pets, rabbits, ferrets) and animals (wildlife), and that good work is not captured here.

Why a Basic Matrix?

This basic matrix was designed to serve as a tool for data collection. It is a simple matrix containing what many have agreed are the minimum data points an organization should consider gathering. By agreeing to this basic matrix - we hope organizations will gather AT LEAST this data, or if an organization all ready gathers a great deal of data, that they will consider rolling up their data into this format to help facilitate (if individual agencies are interested) data collection at a local, regional or national level, which would allow participating agencies to benchmark their work against similar agencies around their region or the nation. This matrix does not reflect any preference for the variety of live release rates used in animal sheltering and welfare. Most rates, other than full Asilomar which requires a conditions matrix, should be able to be calculated from the data points included.



NFHS Basic Data Matrix

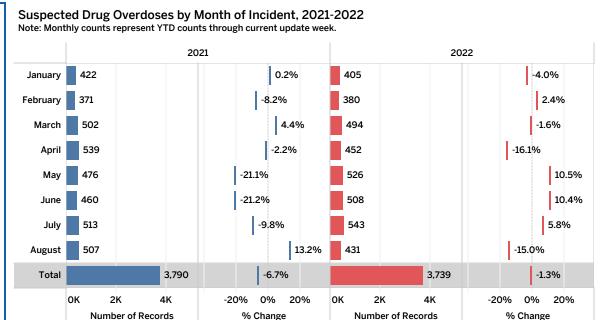
08/01/2022 and 08/31/2022

	METRO NASHVILLE ANIMAL CARE & CONTROL	Species								
			Canine		Canine	Feline Feline				
		Adult	Up to 5 Months	Unknown Age	Totals	Adult	Up to 5 Months	Unknown Age	Totals	Totals
	Beginning Animal Count as of 08/01/2022	120	10	0	130	28	78	0	106	236
١.	Stray/At Large	172	35	5	212	40	63	1	104	316
N T	Transferred in from Municipal Shelter	0	0	0	0	0	0	0	0	0
A	Transferred in from Other Rescue Group	0	0	0	0	0	0	0	0	0
K E S	Owner Requested Euthanasia	4	0	0	4	1	0	0	1	5
	Relinquished by Owner	29	1	0	30	7	5	0	12	42
	Other Intakes	14	0	0	14	5	0	0	5	19
	Total Intakes	219	36	5	260	53	68	1	122	382
	Adoptions	73	15	0	88	29	53	0	82	170
	Returned to Home	64	2	3	69	5	1	0	6	75
0	Transferred to Rescue Group	46	17	0	63	8	26	0	34	97
U	Other Live Outcomes	0	0	0	0	0	0	0	0	0
c o	Return to Field	0	0	0	0	0	0	0	0	0
M E	Total Live Outcomes	183	34	3	220	42	80	0	122	342
s -	Died in Care	0	0	0	0	2	0	0	2	2
	Lost in Care	1	1	0	2	1	1	0	2	4
	Euthanasia Owner Requested	36	0	2	38	11	5	1	17	55
	Euthanasia	4	0	0	4	1	0	0	1	5
	Total Other Outcomes	41	1	2	44	15	6	1	22	66
	Total Outcomes	224	35	5	264	57	86	1	144	408
	Ending Animal Count as of 08/31/2022	119	7	0	126	28	56	0	84	210
	Save Rate	82.79%	97.22%	60.00%	84.38%	73.08%	91.18%	0.00%	82.64%	83.82%

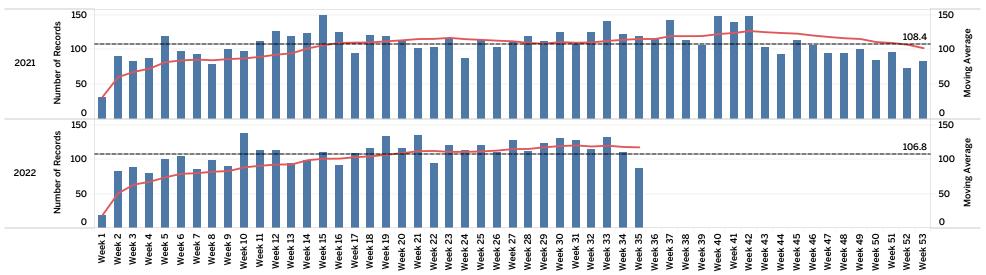
Overdose Response Weekly Surveillance Update Davidson County, TN | Update: 9/2/2022

Suspected Drug Overdoses Requiring NFD-EMS Response

Weekly Average Number of Incidents 2021: 108.4 incidents per week 2022: 106.8 incidents per week Week 35 | August 21-August 27 2021: 119 2022: 87 Weeks 1-35 | January 1-August 27 2021: 3,790 2022: 3,739 **Through the current update week, suspected drug overdose incidents requiring NFD-EMS response are DOWN (-1.3%) compared to the same time period last year.**

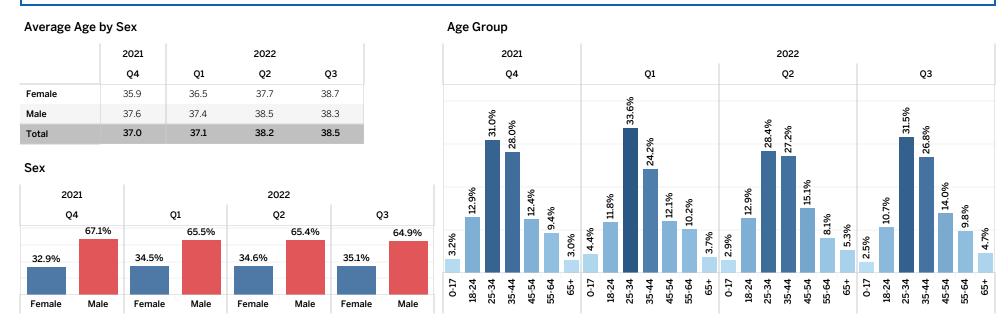


Suspected Drug Overdoses by Week of Incident, 2021-2022

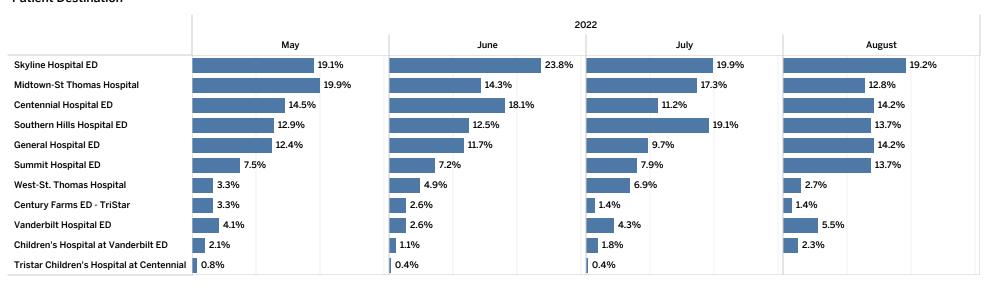


Davidson County, TN | Update: 9/2/2022

Suspected Drug Overdoses Requiring NFD-EMS Response



Patient Destination



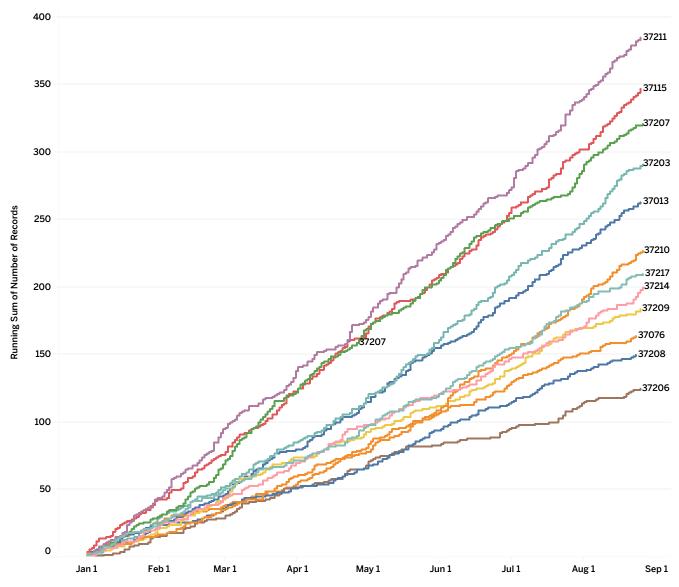
Suspected Drug Overdoses Requiring NFD-EMS Response

Number of Suspected Drug Overdoses by Patient ZIP Code, 2021-2022

Note: Cumulative counts through the current update week are shown.

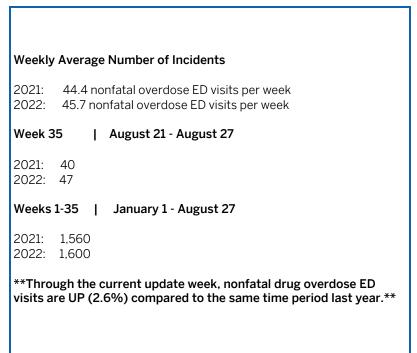
	20	021	2022			
	Number of Records	% Difference from Prev. Year	Number of Records	% Difference from Prev. Year		
37211	369	-11.3%	385	4.3%		
37115	353	-22.1%	347	-1.7%		
37207	344	-10.2%	321	-6.7%		
37203	253	21.1%	291	15.0%		
37013	333	-3.5%	263	-21.0%		
37210	180	-10.9%	227	26.1%		
37217	202	6.3%	210	4.0%		
37214	299	7.6%	200	-33.1%		
37209	198	-19.5%	184	-7.1%		
37201	103	27.2%	171	66.0%		
37076	241	7.1%	164	-32.0%		
37208	121	-14.8%	150	24.0%		
37206	129	29.0%	125	-3.1%		
37072	128	-3.0%	112	-12.5%		
37221	62	-1.6%	82	32.3%		
37138	69	-42.0%	72	4.3%		
37218	73	-41.6%	68	-6.8%		
37204	45	0.0%	49	8.9%		

Running Total: Number of Suspected Drug Overdoses by Patient ZIP Code, 2022 Note: Figure includes the top 10 ZIP Codes with the highest number of suspected drug overdose incidents.

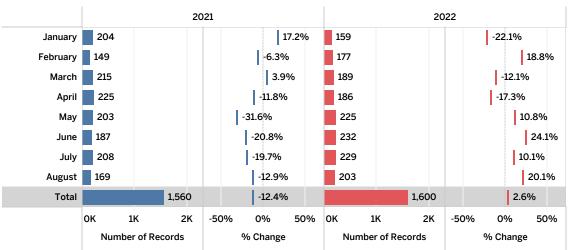


Davidson County, TN | Update: 9/2/2022

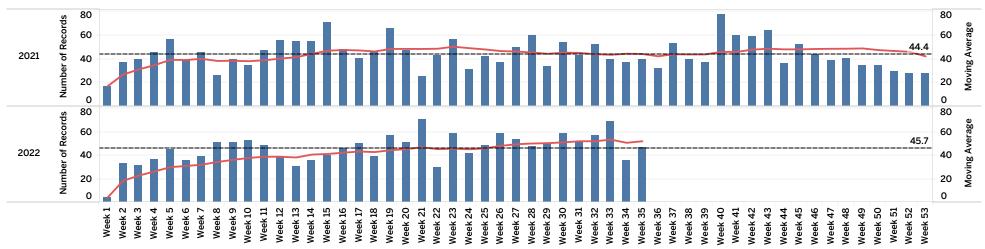
Syndromic Surveillance: Suspected Nonfatal Drug Overdose ED Visits



Nonfatal Drug Overdose ED Visits by Month of Incident, 2021-2022 Note: Monthly counts represent YTD counts through current update week.



Nonfatal Drug Overdose ED Visits by Week of Incident, 2021-2022



Davidson County, TN | Update: 9/2/2022

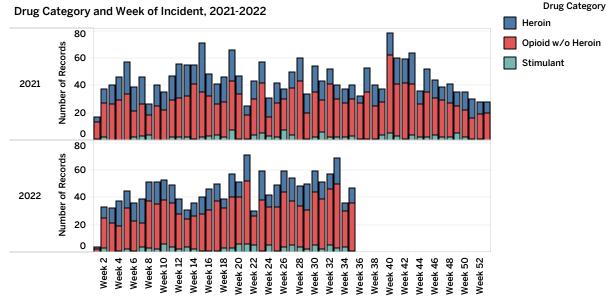
Syndromic Surveillance: Suspected Nonfatal Drug Overdose ED Visits



Davidson County, TN | Update: 9/2/2022

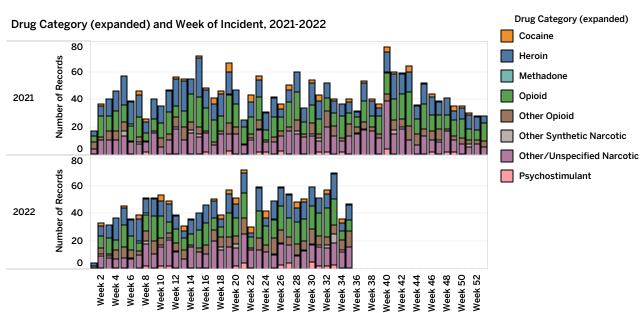
Syndromic Surveillance: Suspected Nonfatal Drug Overdose ED Visits





Drug Category (expanded), 2021-2022

	2021		2022	
	Q4	Q1	Q2	Q3
Other/Unspecified Narcotic	24.7%	25.1%	28.6%	24.6%
Opioid	30.6%	26.1%	27.8%	28.0%
Heroin	25.6%	27.2%	22.4%	22.4%
Other Opioid	12.1%	13.1%	13.7%	14.5%
Cocaine	3.6%	3.8%	4.0%	3.4%
Psychostimulant	1.9%	2.5%	2.2%	3.8%
Other Synthetic Narcotic	1.4%	1.7%	1.1%	3.4%
Methadone	0.2%	0.4%	0.2%	



Overdose Response Weekly Surveillance Update Davidson County, TN | Update: 9/2/2022

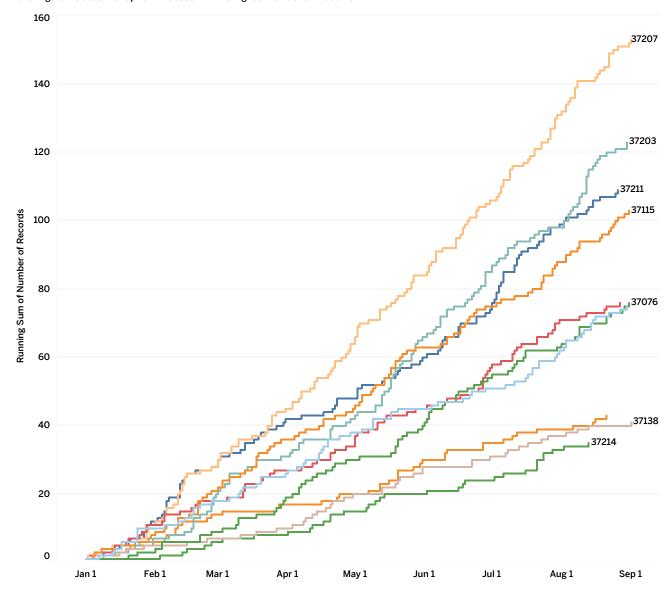
Syndromic Surveillance: Suspected Nonfatal Drug Overdose ED Visits

Number of Overdose-related ED Visits by Patient ZIP Code, 2021-2022

Note: Cumulative counts through the current update week are shown.

	2021		2022			
	Number of Records	% Difference from Prev. Year	Number of Records	% Difference from Prev. Year		
37207	136	-7.5%	151	11.0%		
37203	67	13.6%	121	80.6%		
37211	139	-9.2%	109	-21.6%		
37115	75	-39.5%	101	34.7%		
37206	46	-4.2%	76	65.2%		
37013	68	-28.4%	74	8.8%		
37076	66	-36.5%	73	10.6%		
37208	41	-2.4%	62	51.2%		
37210	32	-27.3%	56	75.0%		
37217	35	-50.0%	46	31.4%		
37209	51	-35.4%	43	-15.7%		
37138	38	-22.4%	40	5.3%		
37214	35	-30.0%	35	0.0%		
37122	27	-44.9%	32	18.5%		
37072	27	-32.5%	30	11.1%		
37218	35	45.8%	28	-20.0%		
37216	19	-32.1%	22	15.8%		
37015	21	23.5%	18	-14.3%		
37075	26	-7.1%	14	-46.2%		

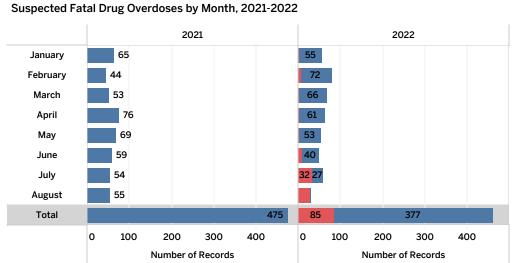
Running Total: Number of Overdose-related ED Visits by Patient ZIP Code, 2022 Note: Figure includes the top 10 ZIP Codes with the highest number of incidents.



Davidson County, TN | Update: 9/2/2022

Suspected Fatal Drug Overdoses





Notes: These data represent deaths accessed from the Death Investigation and Decedent Information Database that are suspected to be drug overdose-related. Further, these deaths have occurred within Davidson County; cases are included in this total regardless of resident status. Monthly counts in 2022 represent YTD counts through the most recent week while monthly counts from 2021 represent the monthly total.

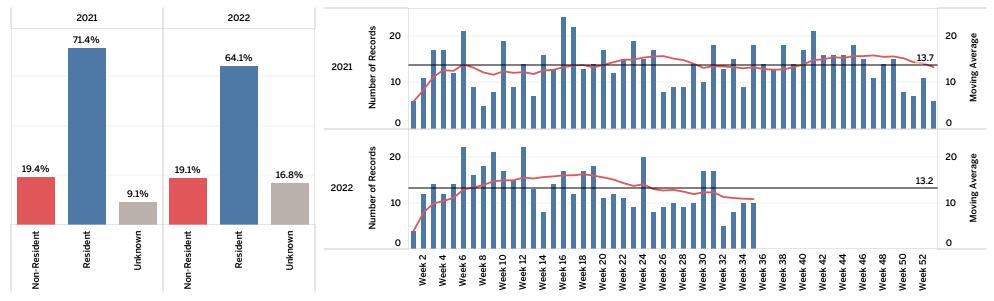
Case Status

Completed

Pending

Decedent Residency Status, 2021-2022

Suspected Fatal Drug Overdoses by Week, 2021-2022



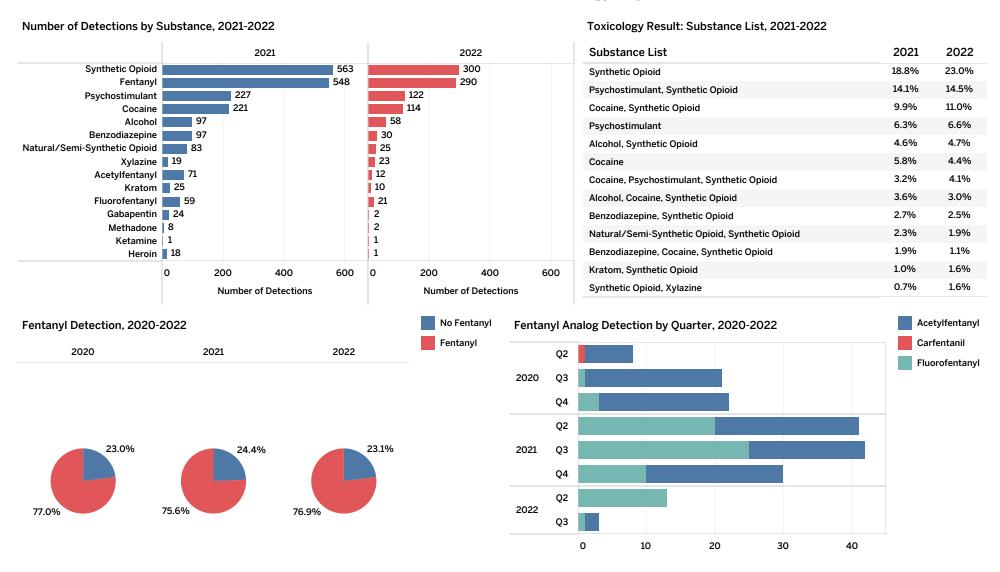
Davidson County, TN | Update: 9/2/2022

Suspected Fatal Drug Overdoses



Suspected Fatal Drug Overdoses

Substances Detected in Toxicology Report



Davidson County, TN | Update: 9/2/2022

Suspected Fatal Drug Overdoses

Percent of Total Suspected Drug Overdose Deaths by Incident ZIP Code, 2021-2022

